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\*\* CONTINUING DATA \*\*\*\*\*

*Not*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

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*Not Yes*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	JAPAN	14	6	1
Examiner's Signature <i>RA</i>	Initials			

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## TITLE

Image forming apparatus

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees
RECEIVED	No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> 1.16 Fees ( Filing )
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